

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

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MICHAEL WERDIGER, INC. and :
ADAMAS MANUFACTURING CORPORATION, :
: Plaintiffs, : Case No.: 07-cv-6934 (LMM)
: :
- against - : AFFIDAVIT OF SERVICE
: :
LUCENT DIAMONDS, INC. AND ALEX :
GRIZENKO, :
: Defendants. :
----- x

STATE OF NEW YORK)
COUNTY OF NEW YORK) SS:

MARTIN BLAKE, being duly sworn, deposes and says:

1. I am over the age of 21 years, not a party to this action, and reside in the State of New York.
2. On August 3, 2007, I personally mailed a true and correct copy of Plaintiff's Summons in a Civil Case, Complaint, Rule 7.1 Disclosure Statement, and Magistrate and Judge's rules to (a) Alex Grizenko, c/o Lucent Diamonds, Inc., 7476 East 29th Avenue, Denver, Colorado 80238, and (b) Alex Grizenko, 560 Lindsey Road, Golden, Colorado 80401 via U.S. Certified Mail Return Receipt Requested.
3. Annexed hereto as **Exhibit A** is a copy of the signed return receipt confirming delivery of the aforementioned items to Alex Grizenko, c/o Lucent Diamonds, Inc., 7476 East 29th Avenue, Denver, Colorado 80238 was made on August 7, 2007.
4. To the best of my knowledge, neither the original package nor the return receipt sent to Alex Grizenko, 560 Lindsey Road, Golden, Colorado 80401 was returned.

By:

Martin Blake

Martin Blake

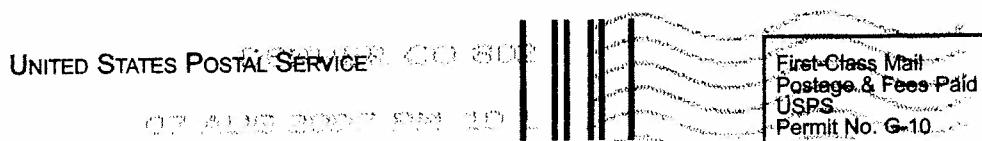
Sworn to before me this
30th day of August 2007

Debra A. Colon

Notary Public

DEBRA A. COLON
Notary Public, State of New York
No. 01CO5082854
Qualified in Richmond County
Commission Expires July 28, 2009

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <i>X Zef R</i></p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Zef R</i></p> <p>C. Date of Delivery <i>8-7-2</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p> <p style="text-align: center;">AUG - 7 - 2007</p>	
<p>1. Article Addressed to:</p> <p><i>Alex Grizenko c/o Lucent Diamonds, Inc 7476 E. 29th Ave. Whey Colony #80 80238</i></p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>Service Label <i>7006 2150 0003 2611 5151</i></p> <p>January 2004</p>		<p>Domestic Return Receipt</p> <p>102595-02-M-1540</p>	



• Sender: Please print your name, address, and ZIP+4 in this box •

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